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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 740145-218										
CERTIFICATE OF MAILING OR TRANSMISSION <small>[37 CFR 1.8(a)]</small>												
<p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop Amendment Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, or being facsimile transmitted to the USPTO at 571-273-8300, on November 30, 2005.</p> <p><i>Kathleen M. McManus</i> Signature</p> <p>Name: Kathleen M. McManus</p>												
In re Application of Takahiro HIRAOKA et al.												
Application Number 10/014,453 Filed 12-14-2001 For IMAGE READER												
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Group Art Unit 2622</td> <td style="width: 50%;">Examiner Heather D. Gibbs</td> </tr> </table>			Group Art Unit 2622	Examiner Heather D. Gibbs								
Group Art Unit 2622	Examiner Heather D. Gibbs											
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate entity fee are as follows (check time period desired):</p>												
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;"><input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120)</td> <td style="width: 20%; text-align: right;">\$ _____</td> </tr> <tr> <td><input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$225/\$450)</td> <td style="text-align: right;">\$450.00</td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$510/\$1020)</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$795/\$1590)</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1080/\$2160)</td> <td style="text-align: right;">\$ _____</td> </tr> </table>			<input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120)	\$ _____	<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$225/\$450)	\$450.00	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$510/\$1020)	\$ _____	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$795/\$1590)	\$ _____	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1080/\$2160)	\$ _____
<input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120)	\$ _____											
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$225/\$450)	\$450.00											
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$510/\$1020)	\$ _____											
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$795/\$1590)	\$ _____											
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1080/\$2160)	\$ _____											
<p><input type="checkbox"/> Applicant claims small entity status.</p> <p><input type="checkbox"/> A check to cover the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>50-2478(740145-218)</u>. I have enclosed a duplicate copy of this sheet.</p>												
<p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p>												
<p>I am the <input type="checkbox"/> applicant/inventor</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record.</p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) <u>_____</u>.</p>												
 Signature		<u>November 30, 2005</u> Date										
<u>David S. Safran</u> Typed or printed name		<u>703-584-3273</u> Telephone Number										
<p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p>												
<input type="checkbox"/> Total of _____ forms are submitted.												

NVA259916.1

SEND TO: Commissioner for Patents
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12/01/2005 5555HE1 00000005 502478 1001453
01 FC:1252 450.00 DA

FEE TRANSMITTAL FOR FY 2005

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	(S)450.00
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Complete if Known	
Application Number	10/014,453
Filing Date	12-14-2001
First Named Inventor	Takahiro HIRAOKA et al.
Examiner Name	Heather D. Gibbs
Art Unit	2622
Attorney Docket No.	740145-218
	NUV 30 2005

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order Other None

Deposit Account:
Deposit Account Number 50-2478(740145-218)

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge my additional fee(s)
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 300	2001 150	Utility filing fee	
1002 200	2002 100	Design filing fee	
1003 200	2003 100	Plant filing fee	
1004 300	2004 150	Reissue filing fee	
1005 200	2005 100	Provisional filing fee	

SUBTOTAL (1) (S) 0

3. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
2	-20** = 0	X 0 - 0	0
Independent Claims 1	-3** = 0	X 0 - 0	0
Multiple Dependent	X 0 - 0		

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1202 50	2202 25	Claims in excess of 20
1201 200	2201 100	Independent claims in excess of 3
1203 360	2203 180	Multiple dependent claims, if not paid
1204 200	2204 100	** Reissue independent claims over original patent
1205 50	2205 25	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (S) 0

** or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description
Fee Code (\$)	Fee Code (\$)	
1051 130	2051 65	Surcharge - late filing fee or cash
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet
1053 130	1053 130	Non-English specification
1812 2,520	1812 2,520	For filing a request for ex parte reexamination
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action
1251 120	2251 60	Extension for reply within first month
1252 450	2252 225	Extension for reply within second month
1253 1,020	2253 510	Extension for reply within third month
1254 1,590	2254 795	Extension for reply within fourth month
1255 2,160	2255 1,080	Extension for reply within fifth month
1401 500	2401 250	Notice of Appeal
1402 500	2402 250	Filing a brief in support of an appeal
1403 1,000	2403 500	Request for oral hearing
1451 1,510	1451 1,510	Petition to institute a public use proceeding
1452 500	2452 250	Petition to revive - unavoidable
1453 1,500	2453 750	Petition to revive - unintentional
1501 1,400	2501 700	Utility issue fee (or reissue)
1502 800	2502 400	Design issue fee
1503 1,100	2503 550	Plant issue fee
1450 130	1460 130	Petitions to the Commissioner
1807 50	1807 50	Processing fee under 37 CFR 1.17(d)
1806 180	1806 180	Submission of Information Disclosure Stmt
8031 40	8021 40	Recording each patent assignment per property (times number of properties)
1809 790	2809 395	Filing a submission after final rejection (37 CFR 1.129(a))
1810 790	2810 395	For each additional invention to be examined (37 CFR 1.129(b))
1801 790	2801 395	Request for Continued Examination (RCE)
1802 900	1802 900	Request for expedited examination of a design application

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (S) 450.00

CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]

I hereby certify that this correspondence is being:

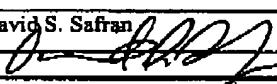
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November 30, 2005 Date


Signature
Kathleen M. McManus
Typed or printed name

SUBMITTED BY

Name (Print/Type)	David S. Safran 	Registration No. 27,997 (Attorney/Agent)	Telephone 703-584-3270-
Signature		Date	November 30, 2005

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NVA259915.1